

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
091648,152

APPLICANT(S)

FILING DATE
8-25-00

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2		1				
3	1					
4	1					
5	1					
6	1					
7	1					
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50						
TOTAL IND.	3					
TOTAL DEP.	16					
TOTAL CLAIMS	19					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
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BEST AVAILABLE COPY